

Connecticut State Department of Education /Primary Mental Health Program

Primary Mental Health Program (PMHP)

Quality of Life Result: Patterns of school failure often begin in the first three years of school and may have long-term socio-emotional and academic implications. Students of the PMHP experience improved school adjustment and peer relationships and are better able to engage the educational environment at an early age.

Purpose: The PMHP is designed to:

- provide early detection of school adjustment difficulties in students grades kindergarten through three (K-3)
- prevent the development of social and emotional problems by enhancing student adjustment
- engage students in child-led play activities to address mild aggression, withdrawal, and learning difficulties
- support the development of behaviors that promote student learning, and
- promote collaboration with teachers, school mental health professionals, parents, and administrators.

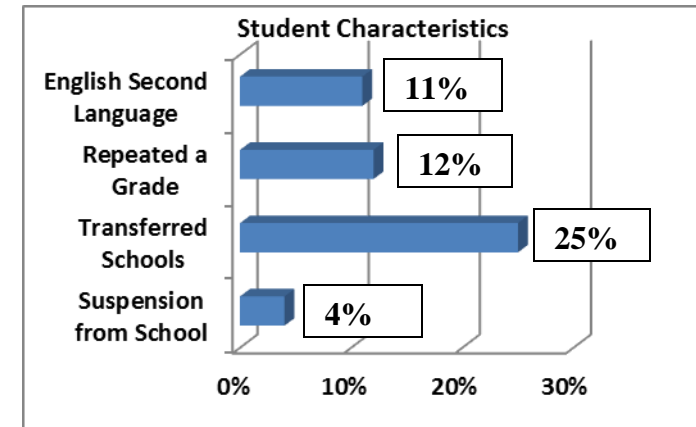
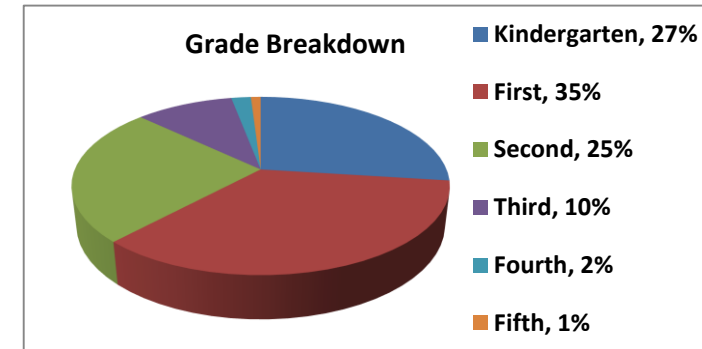
Major Customers: Teachers in grades Kindergarten to three complete a behavioral screener, the AML-R Behavior Rating Scale (AML-R), with all students.

The results of this screener, with input from staff, lead to the selection of students who would most benefit from participation in the PMHP. Students who present with mild to moderate behavioral concerns are eligible for participation.

How are We Doing?

In 2009-10, eighteen school districts received a PMHP grant and approximately 800 students received services. The total budget appropriation was \$475,275 (after the required 5% reduction) and district awards ranged from \$12,851 - \$25,000. Students are engaged weekly for thirty minutes in one-to-one child-led play activities. All grantees augmented their services by implementing either a complementary behavioral health component or expanding to an additional school and incorporating parent involvement in PMHP activities. A complementary behavioral health program provides prevention services such as positive behavioral supports (i.e., for all students) and/or early intervention services (i.e., for students at elevated risk) that enhance the benefits of the PMHP by improving pro-social behavior, school adjustment and/or family support for education. The Background Information Form (BIF), completed prior to the implementation of the first PMHP session, provides a systematic way to gather information to inform program goals.

The demographics for the PMHP participants (2009-10) reveal that the majority are enrolled in grades K-3 with two percent in grade four and one percent in grade 5. Approximately twenty-five percent are transfer students.



Are the Customers Better Off?

The PMHP is a nationwide evidence-based program that has received several national

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accolades including recognition from the U.S Department of Education's Safe, Disciplined and Drug-Free Schools Expert Panel, the U.S. Surgeon General's Report on Mental Health (1999), and inclusion on SAMHSA's National Registry of Evidence-Based Programs and Practices (NREPP).

The Teacher-Child Rating Scale (T-CRS) is completed by the student's teacher prior to and at the close of participation in the program and rates each student's progress on four **Performance Measures**:

Task Orientation

Learning difficulty, tolerance for frustration, willingness to follow school rules, and disruptive behavior

Behavior Control

"Acting out", aggression, tolerance for frustration, willingness to follow school rules, and disruptiveness

Assertiveness

Assertiveness in social situations and in comparison with shyness and anxiety

Peer Sociability

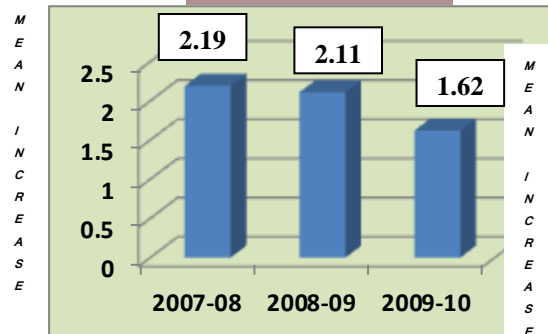
Social skills with peers

The following graphs depict a three year trend showing mean score growth **between pre- and post- evaluation within each year**, in each of the four performance areas. Each year, the mean score growth in the four performance areas

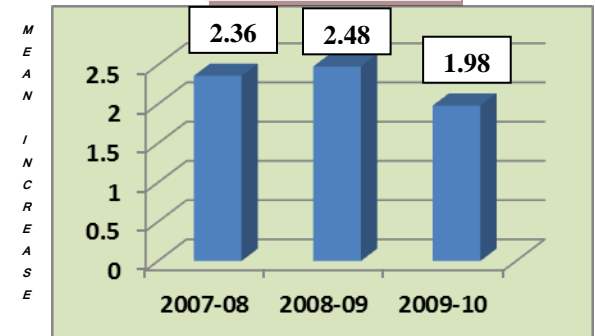
show statistically significant ($p \leq .05$) improvement in student's functioning. The Department recognizes with at least 95% confidence that the positive results on the T-CRS are due to the effects of the PMHP.

Teacher-Child Rating Scale (T-CRS)

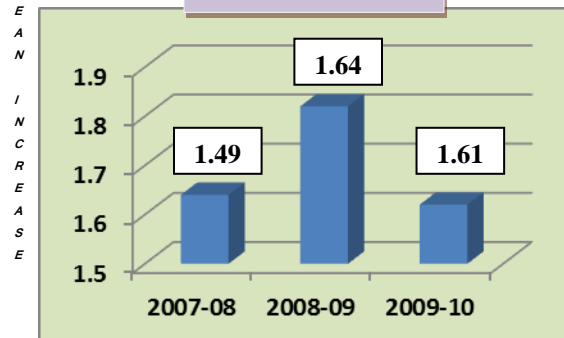
Task Orientation



Assertiveness



Behavior Control



Peer Sociability

